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Fill in this information to identify your case:	
United States Bankruptcy Court for the:  Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name  Write the name that is on	Regina First name	First name
your government-issued picture identification (for example, your driver's license or passport	Middle name  Agnew	Middle name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or	XXX - XX- 9670 OR	XXX - XX- OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Regina First Name	J Agnew Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		202 N Owen St.  Number Street	Number Street
		Mount Prospect Illinois 60056 City State Zip Code	City State Zip Code
		Cook State Zip Code	City State Zip Code
		If your mailing address is different from the above, fill it in here. Note that the court will sen notices to you at this mailing address.	
		Number Street	Number Street
_		City State Zip Coc	de City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition lived in this district longer than in any other dis	strict. lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C.	§§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		_	

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De	btor 1 Regina	J	Agnew		Case number (if kno	own)	
	First Name	Middle Name	Last Name				
Pai	t 2: Tell the Court Abo	ut Your Bankrupto	cy Case				
	The chapter of the Bankruptcy Code you are choosing to file under		orief description of each, see 32010)). Also, go to the top of				ndividuals Filing for
	How you will pay the fee	more details ab cashier's check may pay with a lined to pay to lindividuals to	entire fee when I file my poout how you may pay. Type, or money order If your a credit card or check with a che fee in installments. If year Your Filing Fee in Installments is not required to, waive yearty line that applies to you so option, you must fill out ad file it with your petition.	oically, if you attorney is a pre-printer you choose allments (O ay request your fee, an ur family si	ou are paying the submitting you ed address. This option, sign official Form 103 this option only d may do so on ze and you are u	e fee yourself, r payment on y and attach to A).  If you are filingly if your incorunable to pay to	you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If
	Have you filed for bankruptcy within the last 8 years?	No.  Yes. District  District  District	Northern District of Illinois  Northern District of Illinois	When When When	6/15/2012 MM / DD / YYYY 8/19/2009 MM / DD / YYYY MM / DD / YYYY	Case number _ Case number _ Case number _	12-24315 1:09-bk-30387
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  Yes. Debtor District Debtor District		When	MM / DD / YYYY	Relationship to Case number, i Relationship to Case number, i	if known
	Do you rent your residence?	✓ No. (	12. andlord obtained an eviction Go to line 12. Fill out <i>Initial Statement About</i> his bankruptcy petition.				

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Debtor 1 Regina Agnew \_\_ Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Regina
 J
 Agnew
 Case number (if known)

 First Name
 Middle Name
 Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Regina First Name		Agnew ast Name	Case number (if known)	
	estions for Reporting Purposes			
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17.  16c. State the type of debts you	consumer debts? Co primarily for a persona business debts? Business debts? Business debts?	al, family, or household iness debts are debts the head of the buse	purpose." at you incurred to obtain siness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that for No.	7. Do you estimate that a	after any exempt property distribute to unsecured cr	r is excluded and administrative editors?
18. How many creditors do you estimate that you owe?	☐ 1-49 ☑ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,00 10,001-25,0	00	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001	\$10 million   -\$50 million  -\$100 million  -\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001	\$10 million  I-\$50 million  I-\$100 million  D1-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				.f
For you	of title 11, United States Code. under Chapter 7.  If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state.	napter 7, I am aware that I understand the relief of I did not pay or agreemed and read the notice that the chapter of title 1 tement, concealing processing the statement of the concealing processing the statement of the statem	at I may proceed, if eligil available under each ch to pay someone who is e required by 11 U.S.C. 1, United States Code, sperty, or obtaining mor	pole, under Chapter 7, 11,12, or 13 papter, and I choose to proceed as not an attorney to help me fill § 342(b).  specified in this petition.
	both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.		
	/s/ Regina Agnew Signature of Debtor 1		Signature of Debto	or 2
	Executed on 12/6/2016 MM / DD	//YYYY	Executed on _	MM / DD / YYYY

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Debtor 1 Regina	J	Agnew	Case number (	if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 1	2, or 13 of title 11, Unite	have informed the debtor(s) about ed States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the	information in the sche	dules filed with the petition is incorrect.
attorney, you do not	4.5			·
need to file this page.	/s/ Yisroel Y Mosko	vits	Date	12/6/2016
	Signature of Attorney	for Debtor		MM / DD / YYYY
	Yisroel Y Moskovits			
	Printed name			
	Semrad Law Firm			
	Firm name			
	10 N. Martingale Road	d		
	Street			
	Suite 400			
	Schaumburg		Illinois	60173
	City		State	Zip Code
	Contact phone	3122543191	Email address	imoskovits@semradlaw.com
			Illinoi	
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Regina	J	Agnew				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

Check if this is an
amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	<b>Your assets</b> Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	40.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,349.09
1c. Copy line 63, Total of all property on Schedule A/B	\$2,349.09
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$23,047.22
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	D = \$\frac{\pi_{20,047.22}}{
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$52,806.44 ———————————————————————————————————
ob. Oby the total claims from Fait 2 (nonphonty unsecured claims) from line of or <i>observate Lit</i>	\$75,853.66
Your total liabilit	
Your total liabilit	
Your total liabilit  Part 8: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I)	\$2.141.40
Your total liabilit Part 3: Summarize Your Income and Expenses	\$2,141.40

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Deb	otor 1 Regina	J	Agnew	Case number (if known)							
	First Name	Middle Name	Last Name								
Part	4: Answer These Qu	uestions for Administrat	tive and Statistical Record	ls							
6. <b>A</b>	re you filing for bankrupt	cy under Chapters 7, 11, o	r 13?								
Г	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
	✓ Yes.										
Ľ	<u>v</u>										
7. <b>W</b>	/hat kind of debt do you l	have?									
[				an individual primarily for a personal,							
			Fill out lines 8-10 for statistical pu								
		rimarily consumer debts. You rith your other schedules.	ou have nothing to report on this	s part of the form. Check this box and s	ubmit						
		,									
		our Current Monthly Incom , Form 122B Line 11; <b>OR</b> , Fo	ne: Copy your total current month	hly income from Official	\$100.00						
	TOTH 122A-1 Line 11, OR,	, roilli 122B Lille 11, <b>OR</b> , re	ли 1220-1 Line 14.								
9.	Copy the following spec	ial categories of claims fro	om Part 4, line 6 of Schedule E	E/F:							
	From Part 4 on Schedul	e E/F, copy the following:	Total claim								
	Trom rait 4 on ochedule 21, copy the following.										
	9a. Domestic support obl	igations (Copy line 6a.)		\$0.00							
	Oh Tayon and portain oth	er debts you owe the govern	mont (Conviling 6h.)	\$0.00							
	3b. Taxes and certain our	er debis you owe the govern	птепт. (Сору ште об.)								
	9c. Claims for death or pe	ersonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00							
9d. Student loans. (Copy line 6f.) \$0.00											
	9e Obligations arising ou	t of a separation agreement of	\$0.00								
	priority claims. (Copy line		a.ro. oo arat you ara not roport								
	Of Dobto to popular and	rofit oboring plane on death ar	raimilar dabta (Capy line Ch.)	\$0.00							
	ar. Debis to perision or pr	ront-shaning plans, and other	similar debts. (Copy line 6h.)								

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information	to identify your o	ase:					
Debtor 1	Regin	ia Name	J Najalalia N	Agnew				
Debtor 2			Middle N					
(Spouse, if f	- 111311	Name	Middle N	ame Last Name  District of Illinois				
		tcy Court for the:	Northern	(State)				
Case nun							Ob sale if their is an	
Officia	al Form	106A/B					Check if this is an amended filing	
Sche	dule A	/B: Prope	erty				12/1	
category responsib	where you to le for supply r name and	hink it fits best. I ring correct infor case number (if l	Be as complete a mation. If more s known). Answer e	st an asset only once. If an asse nd accurate as possible. If two pace is needed, attach a separa very question. nd, or Other Real Estate Yo	married people a ate sheet to this	re filing together, both a form. On the top of any a	are equally	
1. Do yo			quitable interest	n any residence, building, land,	, or similar prope	rty?		
<b>✓</b>	No. Go to F							
ш	Yes. Where	is the property?		What is the property? Check a	ll that apply	Do not deduct secured	claims or exemptions. Put	
1.1	Observation	and the second second	- 11	Single-family home	ar triat apply.	the amount of any secu	ured claims on Schedule D: aims Secured by Property.	
	Street address, if available, or other description		Duplex or multi-unit building	•	Current value of the Current value of th			
				Condominium or cooperative  Manufactured or mobile hon		entire property? portion you own?		
				Land				
	Number	Street		Investment property		Describe the nature of interest (such as fee s		
	City	State	Zip Code	Timeshare Other	<u></u>	the entireties, or a life	e estate), if known.	
				Who has an interest in the proone.	pperty? Check	Check if this is co (see instructions)	ommunity property	
				Debtor 1 only		_		
				Debtor 2 only  Debtor 1 and Debtor 2 only				
				At least one of the debtors a	nd another			
				Other information you wish to property identification numbe		em, such as local		
If you	own or have	e more than one, I	ist here:	proporty recommonders manual	·- <u></u>			
1.2				What is the property? Check a	ll that apply.		claims or exemptions. Put ired claims on <i>Schedule D:</i>	
1.2	Street addre	ess, if available, or	other description	Single-family home  Duplex or multi-unit building	1	Creditors Who Have Claims Secured by Property		
				Condominium or cooperative		Current value of the entire property?	Current value of the portion you own?	
				Manufactured or mobile hom	ne			
	Number	Street		Land Investment property		Describe the nature of	f your ownership	
	City	State	Zip Code	Timeshare Other		interest (such as fee s the entireties, or a life		
	· •		,	Who has an interest in the proone.  Debtor 1 only	operty? Check	Check if this is co (see instructions)	ommunity property	
				Debtor 2 only  Debtor 1 and Debtor 2 only				
				At least one of the debtors at	nd another			
				Other information you wish to	add about this is	om such as local		

property identification number:

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Debtor 1	Regina First Name	J Middle Name	Agnew Last Name	Case numbe	r (if known)	
	et address, if available, or other		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	t apply.	the amount of any secu Creditors Who Have Cla Current value of the entire property?	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
City		ip Code [	Investment property Timeshare Other  Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 t <b>y?</b> Check one.	Describe the nature o interest (such as fee s the entireties, or a life Check if this is co (see instructions)	imple, tenancy by e estate), if known.
	the dollar value of the portic ve attached for Part 1. Write	n you own for a that number h		about this item,		
Do you ow			t in any vehicles, whether they are			
	ns, trucks, tractors, sport utility		also report it on Schedule G: Execut cycles	ory Contracts and	Unexpired Leases.	
3.1	Make Model: Year: Approximate mileage:		Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Other information: 2005 Dodge Grand Caravan		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a  Check if this is community instructions)		Current value of the entire property? \$393.00	Current value of the portion you own? \$393.00
3.2	Make Model:		Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage:  Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit instructions)		Current value of the entire property?	Current value of the portion you own?

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	Regina First Name	J Middle News	Agnew  Last Name	Case number		
	First Name	Middle Name				
3.3	Make		Who has an interest in the pr	roperty? Check		claims or exemptions. P
	Model:		one.			red claims on <i>Schedule</i> aims Secured by Property
	Year:		Debtor 1 only		Creditors virio riave Cia	uills secured by Floperty
	Approximate mileage:	-	Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communit	ty property (see		
			instructions)			
3.4	Make		Who has an interest in the pr	roperty? Check	Do not deduct secured	claims or exemptions. P
	Model:		one.		•	red claims on Schedule
	Year:		Debtor 1 only		Creditors Who Have Cla	nims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communit	ty property (see		
			instructions)			
Exan			ner recreational vehicles, other vent, fishing vessels, snowmobiles, m			
Exan	nples: Boats, trailers, motor No Yes Make		ner recreational vehicles, other vertical fit, fishing vessels, snowmobiles, more with the provided that the provided who has an interest in the provided that the provided with the provided that the provided with the provided with the provided that the provided with the provided wi	otorcycle accessor	Do not deduct secured	claims or exemptions. P
Exan	nples: Boats, trailers, motor No Yes		who has an interest in the proper	otorcycle accessor	Do not deduct secured the amount of any secu	claims or exemptions. Pr ared claims on <i>Schedule</i> aims Secured by Property
Exan	nples: Boats, trailers, motors No Yes Make Model:		who has an interest in the prone.  Debtor 1 only	otorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule iims Secured by Property
Exan	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only  Debtor 2 only	otorcycle accessor	Do not deduct secured the amount of any secu	red claims on Schedule
Exan	nples: Boats, trailers, motors No Yes Make Model: Year:		who has an interest in the prone.  Debtor 1 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exan	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only At least one of the debtors	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exan	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is community	roperty? Check  and another  ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions)	roperty? Check  and another  ty property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. Poured claims on Schedule
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Other information:  Make  Model:  Year:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions) Who has an interest in the prone.	roperty? Check  and another  ty property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Property  Current value of the portion you own?
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions)  Who has an interest in the prone.	roperty? Check  and another  ty property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. Poured claims on Schedule
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Other information:  Make  Model:  Year:		who has an interest in the prone.  Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions)  Who has an interest in the prone.  Debtor 1 and Debtor 2 only At least one of the debtors Debtor 1 only	otorcycle accessor roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule nims Secured by Property  Current value of the portion you own?  claims or exemptions. Property ared claims on Schedule nims Secured by Property
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model: Year:  Approximate mileage:  Other information:  Make  Model: Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors. Check if this is communitinstructions)  Who has an interest in the prone. Debtor 1 only	roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. Property lived claims on Schedule hims Secured by Property  Current value of the
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model: Year:  Approximate mileage:  Other information:  Make  Model: Year:  Approximate mileage:		who has an interest in the prone.  Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communit instructions)  Who has an interest in the prone.  Debtor 1 and Debtor 2 only Debtor 2 only At least one of the debtors Check if this is communit instructions)  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	roperty? Check  and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule nims Secured by Property  Current value of the portion you own?  claims or exemptions. Property ared claims on Schedule nims Secured by Property  Current value of the

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De	ebtor 1	Regina First Name	J Middle Name	Agnew  Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Househ			
D	o you	own or hav	e any legal or equitable ir	nterest in any of the follow	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp	_	and furnishings liances, furniture, linens, china,	kitchenware		
<u> </u>	No Yes. [	Describe	sofa love seat			\$200.00
		tronics bles: Television	s and radios; audio, video, stere	eo, and digital equipment; comp	outers, printers, scanners; music	
<b>✓</b>	Yes. [	Describe	cellphone, tablet, microwave			\$100.00
	Examp		and figurines; paintings, prints,	or other artwork; books, pictures other collections, memorabilia, o		
	No Yes. [	Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other s; carpentry tools; musical instr		ol tables, golf clubs, skis; canoes	
<b>✓</b>	No Yes. [	Describe				
1	0. Fire	earms				
J	Examp No	oles: Pistols, rifl	es, shotguns, ammunition, and	d related equipment		
	Yes. [	Describe				
	1. Clo		clothes, furs, leather coats, design	igner wear, shoes, accessories		
	No Yes. [	Describe	clothing			¢150.00
1	2. Jew					\$150.00
		oles: Everyday j gold, silve		gement rings, wedding rings, hei	irloom jewelry, watches, gems,	
	No Yes. [	Describe				
		n-farm animal bles: Dogs, cats	s, birds, horses			
✓	No Voc. I	Dogoriba				
Ш	res. L	Describe				
	<b>4. Any</b> No	other person	al and household items you o	did not already list, including	any health aids you did not list	
		Describe				
			lue of all of your entries from number here	n Part 3, including any entries	s for pages you have attached	\$450.00

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Agnew Debtor 1 Regina Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Bank of America- prepaid card \$6.09 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Regina	J	Agnew	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
20.	Negotiable instruments	porate bonds and other negotia include personal checks, cashier eents are those you cannot transf Issuer name:	s' checks, promissory no	tes, and money orders.	
21.	Retirement or pension Examples: Interests in I		b), thrift savings accounts	, or other pension or profit-sharing plans	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:			
		Retirement account:	-		
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments d deposits you have made so the with landlords, prepaid rent, pub			
	✓ Yes	Electric:	deposit with landlord		\$1500.00
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract for	or a periodic payment of money	to you, either for life or for	a number of years)	
	✓ No  Yes	Issuer name and description:			

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Debto	or 1 Regina	J	Agnew	Case number (if known)	
0.4	First Name	Middle Name	Last Name		
24.		n education IRA, in an account in 530(b)(1), 529A(b), and 529(b)(1).	i a qualified ABLE program, or u	nder a qualified state tuition program.	
	<b>√</b> No				
	Yes	Institution name and description. S	eparately file the records of any inte	rests.11 U.S.C. § 521(c):	
	100				
25.		able or future interests in propert	y (other than anything listed in li	ne 1), and rights or powers	
	exercisable f	or your benefit			
	✓ No	9			
	Yes. Desc	nbe			
26.		yrights, trademarks, trade secret: ernet domain names, websites, proc			
	No No	•	,	•	
	Yes. Desc	ribe			
27.	Licenses, fra	nchises, and other general intang	iibles		
		lding permits, exclusive licenses, co-		or licenses, professional licenses	
	<b>✓</b> No				
	Yes. Desc	ribe			
Mon	ey or proper	ty owed to you?			Current value of the
Mon	ey or proper	ty owed to you?			portion you own?
Mon	ey or proper	ty owed to you?			
	ey or proper				portion you own? Do not deduct secured
	Tax refunds o	wed to you			portion you own? Do not deduct secured claims or exemptions.
	Tax refunds on  ✓ No  ✓ Yes. Give s	wed to you specific information		Federal:	portion you own? Do not deduct secured
	Tax refunds on  ✓ No  Yes. Give s abou you a	wed to you specific information t them, including whether already filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds on  ✓ No  Yes. Give s abou you a	wed to you specific information t them, including whether			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on  No Yes. Give s abou you a and t	specific information t them, including whether already filed the returns he tax years		State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  Yes. Give sabou you a and t  Family suppor  Examples: Past	specific information t them, including whether already filed the returns he tax years	support, child support, maintenan	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal	support, child support, maintenan	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years	support, child support, maintenan	State:  Local:  ce, divorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal	support, child support, maintenan	State: Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal	support, child support, maintenan	State:  Local:  ce, divorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal	support, child support, maintenan	State: Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past	specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal	support, child support, maintenan	State:  Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s	specific information t them, including whether already filed the returns he tax years		State: Local:  Ce, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp	specific information t them, including whether already filed the returns he tax years	nents, disability benefits, sick pay, v	State: Local:  Ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on  Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp	specific information t them, including whether already filed the returns he tax years	nents, disability benefits, sick pay, v	State: Local:  Ce, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on  ✓ No  Yes. Give s about you a and t  Family suppor Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp Soc	specific information t them, including whether already filed the returns he tax years   t due or lump sum alimony, spousal specific information  s someone owes you aid wages, disability insurance paym ial Security benefits; unpaid loans yo	nents, disability benefits, sick pay, v	State: Local:  Ce, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Regina	J	Agnew	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, disa		h savings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Name the ins	surance company	Company name:	Beneficiary:	Surrender or refund value:
32.				y, or are currently entitled to receive	
	No Yes. Describe				
33.			ou have filed a lawsuit or made ance claims, or rights to sue	a demand for payment	
24	Yes. Describe	d unlimited at a latera of a			
34.	to set off claims	d unliquidated claims of e	very nature, including counter	claims of the debtor and rights	
	Yes. Describe				
35.	Any financial assets	you did not already list			
	Yes. Describe				
36.			Part 4, including any entries fo		\$1506.09
Part	5: Describe Any I	Business-Related Prop	erty You Own or Have an I	nterest In. List any real estate in Part	1.
37.	Do you own or have	any legal or equitable inte	rest in any business-related pr		
	No. Go to Part 6.  Yes. Go to line 38	i.		pc Dc	urrent value of the ortion you own? o not deduct secured claims exemptions
38.		or commissions you alrea	dy earned		
	Yes. Describe				
39.		rnishings, and supplies elated computers, software,	modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, electro	onic devices
	✓ No Yes. Describe				

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Debt	tor 1 Regina J	Agnew	Case number (if known)	
ı	First Name Middle Na			
40.	Machinery, fixtures, equipment, supplies	you use in business, and tools of your	trade	
	<b>✓</b> No			
	Yes. Describe			
	_			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
10				
42.	Interests in partnerships or joint ventures	•		
	✓ No	Nome of ontitu	% of ownership:	
	Yes. Give specific	Name of entity:	% of ownership.	
	information about			<u> </u>
	them			
				<del>-</del>
43.	Customer lists, mailing lists, or other comp	ilations		
	<b>✓</b> No			
	Yes. Do your lists include personally iden	tifiable information (as defined in 11 U.S.	.C. § 101(41A))?	
	— — — — — — — — — — — — — — — — — — —			
	No N			
	Yes. Describe			
44.	Any business-related property you did not	already list		
	■ N:			
	No			
	Yes. Give specific information			
	inomation			<del></del>
				<del></del>
		•		<del></del>
				<del></del>
	dd the dollar value of all of your entries fro			
for Pa	art 5. Write that number here			
David	16: Describe Any Farm- and Comme	rcial Fishing-Related Property Y	ou Own or Have an Interest In.	
Part	If you own or have an interest in farmland, lis			
46.	Do you own or have any legal or equitable	interest in any farm- or commercial	fishing-related property?	
10.		s mercet in any larin or commercial	noming rotated property.	Current value of the
	No. Go to Part 7.			portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
47	Form onimals			or exemptions
47.	Farm animals  Examples: Livestock, poultry, farm-raised fish	1		
	No			
	Yes. Describe			

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Debt	tor 1 Regina First Name	J Middle Name	Agnew Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.	Farm and fishing equi	pment, implements, machinery, fixtu	res, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
<b>-</b> 4	A fa		d		
51.	No	rcial fishing-related property you did	i not aiready list		
	Yes. Describe				
		II of your entries from Part 6, includi		you have attached	
for Pa ▶	art 6. Write that numbe	r here			
5 .	Describe All Due	an anti-Vari Orion ay Haria ay Inta	wastin That Val. Did N	let I let Aberra	
Part 53.	<u> </u>	perty You Own or Have an Interperty of any kind you did not already		VOL LIST ADOVE	
		s, country club membership			
	✓ No				
	Yes. Give specific information				
54. A	dd the dollar value of a	II of your entries from Part 7. Write t	hat number here		<u>,</u> ▶
Part 8	8: List the Totals of	f Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate	e, line 2		<b>&gt;</b>	
56. <b>r</b>	oart 2 total vehicles, lin	ne 5	\$393.00		
57. <b>P</b>	art 3: Total personal a	nd household items, line 15	\$450.00	-	
58. <b>P</b>	art 4: Total financial as	ssets, line 36	\$1506.09	-	
59. <b>F</b>	Part 5: Total business-r	elated property, line 45	·	-	
60. <b>F</b>	Part 6: Total farm- and	fishing-related property, line 52		-	
61. <b>F</b>	Part 7: Total other prop	erty not listed, line 54		-	
62. 1	Total personal property	Add lines 56 through 61	\$2349.09	Copy personal property total ▶	+ \$2349.09
				Oopy personal property total	<b>A</b>
63. <b>T</b>	otal of all property on S	Schedule A/B. Add line 55 + line 62			\$2349.09

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Fill in this information to identify your case:							
Debtor 1	Regina	J	Agnew				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_			
Case number (If known)			(-1313)	_			

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Clair	m as Exempt							
1.	Which set of exemptions are you claim	ing? Check one only, ev	ven if your spouse is filing with you.						
	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	You are claiming federal exemption	2)							
2.	For any property you list on Schedule A	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption  735 ILCS 5/12-1001(b)					
	Brief description: Bank of America- prepaid card Line from Schedule A/B: 17	\$6.09	\$6.09  100% of fair market value, up to any applicable statutory limit						
	Brief description: deposit with landlord Line from Schedule A/B: 22	\$1,500.00	\$1,500.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)					
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?						

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ebtor 1			gnew Case number (if known)	
	First Name Midd	lle Name Li	ast Name	
art 2:	Additional Page			
	f description of the property and on Schedule A/B that lists this perty	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Line	ription: clothing	\$150.00	\$150.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Line	ription: cellphone, tablet, microwave	\$100.00	\$100.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line	pription: sofa love seat from edule A/B: 06	\$200.00	\$200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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Fill in	this infor	mation to identify your ca	se:				
Debto	or 1	Regina	J	Agnew			
	_	First Name	Middle Name	Last Name			
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Name			
United	d States B	ankruptcy Court for the:	Northern	District of Illinois			
Casa	number			(State)			
(If know							
Offi	icial	Form 106D			_		Check if this is an mended filing
Scl	hedu	le D: Credit	ors Who Ha	ve Claims Secur	ed by Pron		12/15
				e are filing together, both are equ			
more s	space is i	needed, copy the Additio		mber the entries, and attach it to	• •		
		number (if known). reditors have claims se	oured by your proper	tu?			
1. [	•			vith your other schedules. You ha	ve nothing else to ren	ort on this form	
L	=			with your other seriodales. Four la	ve not in g else to repo	ort ort tillo form.	
		Fill in all of the informatior	i below.				
Part '	1: List	All Secured Claims					
2.				cured claim, list the creditor	Column A	Column B	Column C
	•	-	•	ticular claim, list the other creditors order according to the creditor's	Amount of claim  Do not deduct the	Value of collateral	Unsecured portion
	name.	, , , , , , , , , , , , , , , , , , , ,		3	value of collateral.	that supports	If any
						this claim	
2.1		CEIVABLES EMENT, LLC, c/o	Describe the property	that secures the claim:	\$23,047.22	\$393.00	<u>\$22,654.2</u> 2
	Adeanne Creditor's		Unsecured	, the claim is: Check all that apply.			
	POB 41		Contingent	, the claim is. Check an that apply.			
	Numbe	er Street	Unliquidated				
			Disputed				
	Norfolk City	Virginia 23541 State ZIP Code	Nature of lien. Check	all that annly			
	Who ow	es the debt? Check one.	_				
	<b>✓</b> Deb	tor 1 only	car loan)	made (such as mortgage or secured			
	Deb	tor 2 only	Statutory lien (such	as tax lien, mechanic's lien)			
	Deb	tor 1 and Debtor 2 only	Judgment lien fron	n a lawsuit			
		ast one of the debtors another	Other (including a r	ight to offset)			
		ck if this claim relates community debt	Last 4 digits of accou	nt number			
	Date de incurred	bt was					

\$23,047.22

Add the dollar value of your entries in Column A on this page. Write that number

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HIII	in this infor	mation to identify your c	ase:					
Deb	tor 1	Regina	J	Agnew				
		First Name	Middle Name	Last Name				
	otor 2							
(Spo	use, if filing)	First Name	Middle Name	Last Name				
Unit	ted States E	Bankruptcy Court for the:	Northern	District of Illinois				
				(State)				
Cas (If kn	e number	-						
		100F/F				☐ Ch	eck if this is a	n amended filing
Oil	iiciai F	orm 106E/F				ш		
Sc	chedi	ule E/F: Cre	editors Who	<b>Have Unsed</b>	cured Claims			12/15
othe Forn clair	r party to n 106A/B) ns that are entries in t vn).	any executory contracts and on Schedule G: Exe e listed in Schedule D: C	s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims tach the Continuation Pa	t could result in a claim. expired Leases (Official F s Sec <i>ured by Property</i> . If	s and Part 2 for creditors wit Also list executory contracts form 106G). Do not include a more space is needed, copy op of any additional pages, v	on <i>Sched</i> ny credito the Part y	<i>lule A/B: Pro</i> ers with partia ou need, fill	perty (Official ally secured it out, number
1.		reditors have priority ur Go to Part 2.	nsecured claims against y	ou?				
2.	listed, ide As much Continua	ntify what type of claim it as possible, list the claims tion Page of Part 1. If mor	is. If a claim has both priori	ty and nonpriority amounts ding to the creditor's name particular claim, list the oth		both priorit	y and nonprio	ority amounts.
						Total	Priority	Nonpriority

claim

amount

amount

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 A/R CONCEPTS \$200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 18-3 E DUNDEE RD STE 330 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated BARRINGTON Illinois 60010 State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Opened 4/01/11 Last Active **✓** Is the claim subject to offset? 6/01/11 04 Municipality Des Other. Specify Plaines II **✓** No Yes Advanced Inpatient Consultants \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3461 Momentum Pl Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois Chicago State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **|** Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Medical Is the claim subject to offset? **✓** No Yes 4.3 Advocate Medical Group \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8550 W Byn Mawr Ave # 8th Floor Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60631 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Medical Is the claim subject to offset? **✓** No Yes

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Debtor 1 Regina Agnew Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 All Kids and Familycare \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 19121 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 62794 Springfield Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **|** Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes Allied Interstate 4.5 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Dept 0063 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Palat<u>ine</u> 60055 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Unsecured Is the claim subject to offset? **✓** No Yes **AMERCRED** \$114.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/1/2014 801 Cherry St Ste 3500 Number Street As of the date you file, the claim is: Check all that apply. Contingent Fort Worth Texas 76102 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Americash - Bankruptcy \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 184 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Des Plaines Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Medical Is the claim subject to offset? **✓** No | Yes Ann & Robert Lurie Children's Hospital 4.8 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 4066 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes Arlington Ridge Pathology \$900.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Central Rd Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Arlington Heights Illinois 60005 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Other. Specify \_ Is the claim subject to offset? No

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Debtor 1 Regina Agnew Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Asthma and Allergy Associates \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 9301 W Gold Rd #301 Suite 300 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60016 Des Plaines Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes ATG CREDIT 4.11 \$70.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 6/1/2015 1700 W CORTLAND ST STE 2 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60622 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **|** ORIGINAL CREDITOR: MEDICAL **✓** No PAYMENT DATA Other. Specify Yes 4.12 Best Practices Inpatient Care \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 3880 Salem Lake Dr Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Lake Zurich Illinois 60047 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 CAPITAL ONE \$438.00 Last 4 digits of account number Nonpriority Creditor's Name 11013 W BROAD ST When was the debt incurred? 10/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent 23060 **GLEN ALLEN** Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify \_\_\_\_ CreditCard **✓** No Yes CEP America LLC 4.14 \$49.32 Last 4 digits of account number Nonpriority Creditor's Name Po Box 582663 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated California Modesto City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.15 Check Into Cash Corporate \$0.00 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name When was the debt incurred? 201 Keith Street Ste 80 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 37311 Cleveland Tennessee City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 City of Chicago - Parking and red Light Tickets \$0.00 - Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes City of Des Plaines 4.17 \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 1420 Miner St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Des Plaines 60016 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.18 Comcast \$521.42 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11621 E. Marginal Way # 5 Number Street As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington 98168 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 ComEd \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes 4.20 Cook County Department of Revenue \$84.30 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 118 N Clark St, Room 1160 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60602 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes CREDIT ONE BANK 4.21 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 585 S. PILOT STREET Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated LAS VEGAS Nevada 89119 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Des Plaines Radiologists \$70.83 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6910 S Madison St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60527 Willowbrook Illinois City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes Dr. Mohammad Abtahi M.D. 4.23 \$0.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 1400 E Golf Rd #126 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Des Plaines 60016 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes **EOS CCA** 4.24 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 981008 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated BOSTON Maine 02298 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor		new Case number (if known)	
	First Name Middle Name Las	st Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Continua	ation Page	
rait 2.	It 2. Tour NONF MONTH Offsecured Glaims - Continuation Fage		
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.05	Family Medicine Specialist		ΦΩ ΩΩ
4.25	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	930 Mt Prospect Plaza	When was the debt incurred? n/a	
	Number Street	<del></del>	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
	Mount Prospect Illinois 60056	- <b>!</b>	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debitor 1 only	<u></u>	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Bestor Faria Sestor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Other. Specify  Unsecured	
	Is the claim subject to offset?	Other. Specify Onsecured	
	No		
	Yes		
4.26	FST PREMIER		\$519.00
4.20	Nonpriority Creditor's Name	— Last 4 digits of account number9448	Ψ019.00
	3820 N LOUISE AVE	When was the debt incurred? 1/1/2014	
	Number Street	_	
		As of the date you file, the claim is: Check all that apply.	
	CIOLIV FALLO Courth Delecte 57107	Contingent	
	SIOUX FALLS South Dakota 57107 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	The locations of the district and the thor	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	<b>✓</b> No	<b>—</b>	
	□ Von		
	Yes		
4.27	FST PREMIER	— Last 4 digits of account number 7857	\$411.00
	Nonpriority Creditor's Name	<del></del>	
	3820 N LOUISE AVE Number Street	When was the debt incurred? 9/1/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	SIOUX FALLS South Dakota 57107	<b>=</b> *	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	불	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	브	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	<b>✓</b> No	<del></del>	

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Debtor 1 Regina Agnew Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 \$308.00 Last 4 digits of account number 3454 Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60604 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes **HARRIS** 4.29 \$243.00 Last 4 digits of account number 6751 Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? 8/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60604 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes **HARRIS** 4.30 \$192.00 Last 4 digits of account number 2387 Nonpriority Creditor's Name When was the debt incurred? 111 WEST JACKSON B SUITE 400 7/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60604 Illinois Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? No

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Debtor 1 Regina Agnew Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 \$150.00 Last 4 digits of account number 6820 Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? 8/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60604 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes **HARRIS** 4.32 \$143.00 2024 Last 4 digits of account number Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60604 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes **HARRIS** 4.33 \$136.00 Last 4 digits of account number 2508 Nonpriority Creditor's Name When was the debt incurred? 111 WEST JACKSON B SUITE 400 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60604 Illinois Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.34 Home Patient Services \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8240 N McCormick Blvd. Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Skokie Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes HSBC BANK 4.35 \$0.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 1441, SCHILLING PLACE Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated California 93901 **SALINAS** City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.36 Illinois Bone and Joint \$22.44 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 900 Rand Rd #200 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Des Plaines Illinois 60016 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim ILLINOIS** COLLECTION SE 4.37 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8231 185TH ST STE 100 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60487 TINLEY PARK Illinois City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes IRS<sub>1</sub> 4.38 \$7,326.34 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19101 Philadelphia Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_ Unsecured Is the claim subject to offset? **✓** No Yes JEFFERSON CAPITAL SYST 4.39 \$1,273.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/1/2016 16 MCLELAND RD Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD Minnesota 56303 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify 001 UnknownLoanType **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.40 KMP Health Providers LLC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1400 E Golf Rd # 118 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60016 Des Plaines Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes 4.41 \$757.27 Lincare Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? Po Box 17306 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 33762 Clearwater Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.42 Merchants Credit Guide Co. \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 223 W Jackson Blvd Number Street As of the date you file, the claim is: Check all that apply. Ste 900 Contingent Unliquidated Chicago Illinois 60606 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.43 Midwest Imaging Professionals \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3223831 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 15250 Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes Midwest Pulmonary and Sleep Consultants 4.44 \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 5600 W Addison St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60634 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.45 MIRAMEDRG \$67.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 111 WEST JACKSON Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO Illinois 60604 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Nicor - PO Box 5407 4.46 \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 5407 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes 4.47 Northshore University Healthsystem \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 1301 Central St # 218 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60201 Evanston Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Medical Is the claim subject to offset? **✓** No Yes 4.48 Northwest Community Healthcare \$1,413.38 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 28079 Network Pl Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60673 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.49 Northwest Radiology \$13.48 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Central Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60005 Arlington Heights Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_\_ Medical Is the claim subject to offset? **✓** No Yes 4.50 Pinnacle Management Services \$900.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 830 Roundabout, Suite B Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60118 Dundee Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_\_\_ Medical Is the claim subject to offset? **✓** No Yes 4.51 PLAINS COMMERCE BANK \$330.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1411 E 10th St Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated South Dakota 57103 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.52 Presence Holy Family Medical Center \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 100 N River Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60016 Des Plaines Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes Quest Diagnostics 4.53 \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 2441 Reynolds Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan Muskegon 49444 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes Resurrection Health Care 4.54 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Erie Court Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Oak Park Illinois 60302 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.55 Resurrection Immediate Care \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4900 N Cumberland Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60706 Harwood Heights Illinois City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes 4.56 Resurrection Medical Center \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name 5645 W Addison When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60634 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.57 River Trails School District 26 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1900 E Kensington Rd Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Mount Prospect Illinois 60056 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.58 RushMore Service Center \$411.46 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 5508 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 57117 Sioux Falls South Dakota State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes 4.59 Silverscript \$193.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? PO BOX 504849 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 63150 Saint Louis Missouri City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.60 Sinai Medical Group \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 26460 Network Place Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60673 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.61 Social Security Admin \$25,723.40 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 77 West Jackson Blvd 3rd Floor As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60604 Chicago Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes Sprint 4.62 \$590.13 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? P.O. Box 219554 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 64121 Kansas City Missouri City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.63 Suburban Lung Associates SC \$151.93 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 2776 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60132 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.64 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1405 Xenium Ln N Ste 180 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55441 Minneapolis Minnesota State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes The Pediatric Faculty Foundation Inc. 4.65 \$0.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? PO BOX 4051 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_\_ Medical Is the claim subject to offset? **✓** No Yes TRIBUTE 4.66 \$700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? POB 105555 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **ATLANTA** Georgia 30348 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.67 UroPartners, LLC \$67.74 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2850 S Wabash Ave #106 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60616 Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No Yes Village of Mount Prospect 4.68 \$0.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name 50 S Emerson St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Mount Prospect 60056 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No 4.69 Village of Wauconda Photo Enforcement \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 75 Remittance Dr. Street Number As of the date you file, the claim is: Check all that apply. Suite 6658 Contingent Unliquidated Chicago Illinois 60675 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Unsecured Is the claim subject to offset? **✓** No

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Debtor 1 Regina Agnew Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.70 Walgreens \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1419 Lake Cook Road Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60015 Deerfield Illinois Zip Code State City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes 4.71 Walmart 1 \$4,816.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? PO Box 981400 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 79998 El Paso Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Unsecured Is the claim subject to offset? **✓** No Yes WEBBNK/FHUT 4.72 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/1/2013 Po Box 166 Street Number As of the date you file, the claim is: Check all that apply. Contingent New Jersey 07101 Newark Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_\_\_ CreditCard **✓** No

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Debtor 1	Regina First Name		J Middle Name	Agnew Last Name	Case number (if known)
Part 3:	List Others to E	e Notified A	bout a Debt That Yo	u Already Listed	
col	lection agency is t lection agency her	rying to colle e. Similarly, i	ct from you for a debt yo f you have more than or	ou owe to someone ele ne creditor for any of t	debt that you already listed in Parts 1 or 2. For example, if a se, list the original creditor in Parts 1 or 2, then list the ne debts that you listed in Parts 1 or 2, list the additional in Parts 1 or 2, do not fill out or submit this page.
	Social Secuirty Name			On which entry in P	art 1 or Part 2 did you list the original creditor?
	00 Woodlawn Drive mber Street				Part 1: Creditors with Priority Unsecured Claims one):  Part 2: Creditors with Nonpriority Unsecured
Bal Cit	ltimore y	Maryland State	21241 Zip Code	Last 4 digits of acco	Claims  ount number

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Agnew Debtor 1 Regina Case number (if known) Middle Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here.

\$0.00

6e.

Total claims
from Part 2

6f. Student loans
6f. \$0.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6h. Debts to pension or profit-sharing plans, and other similar debts

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total. Add lines 6f through 6i.

6e. Total. Add lines 6a through 6d.

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Fill in this information to identify your case:						
Debtor 1	Regina	J	Agnew			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(Giaic)			

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or compan	y with whom you have	the contract or lease	State what the contract or lease is for
2.1	Dave Lockard Name 213 N. McArthur St.		·	Residential Lease, Debtor is Lessee, Oral residential lease
	Number	Street		
	Prospect Heights	Illinois	60070	
	City	State	Zip Code	

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		٥,	Journalle 1 ag	0 01 0. 02	
Fill in this info	rmation to identify your o	case:			
Debtor 1	Regina	J	Agnew		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
0			(State)		
Case number (If known)	-			<del></del>	
Official	Form 106H				Check if this is an amended filing
Official	רטווו וטטרו				
Schedul	e H: Your Co	debtors			12/15
<del> </del>	<u> </u>	4001010			
known). Answ	er every question.  ave any codebtors? (If y	ou are filing a joint case, do			write your name and case number (if
		lived in a community pre	porty state or territory	2 (Community proporty states	and territories include Arizona, California,
		xico, Puerto Rico, Texas, W			and terniones include Alizona, California,
V No.	Go to line 3.		•	•	
النا ا	Did vour snouse form	er spouse, or legal equiva	alent live with you at the	time?	
	No	or opodoo, or logal oquive	alone iivo viiai you de alo		
			المعالمة المعالمة	E''ll '- dh	at add as a of that a const
Ш	Yes. In which communi	ty state or territory did yo	u live?	Fill in the name and curre	nt address of that person.
	Name of your spouse,	former spouse, or legal equ	ıivalent		
	Number Street				
	City	State	Zip Co	ode	
	•		_ <sub>F</sub>		
3. In Colum	n 1, list all of your code			if your spouse is filing with	you. List the person shown in line 2

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this information to	identify your case:					
Debtor 1 Regina	J	Agnew				
First Name	Middle Name	Last Nan	ne	Ched	ck if this is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Nan	<u> </u>		An amended filing	
					A supplement showing i	oost-petition chapter 13
United States Bankruptcy ( the:	Court for Northern	District of Illino (Stat			expenses as of the follo	
Case number		(====		- I		
(lf known)					MM / DD / YYYY	
Official Form 1	<u>06I</u>					
Schedule I: Yo	ur Income					12/15
information about your s		nd your spouse	is not filing w	rith you, do r	not include informat	ion about your
Fill in your employment	t	Debtor 1			Debtor 2	
information.					_	
If you have more than or	•	Employe			Employed	
attach a separate page w information about addition		✓ Not Emp	loyed		Not Employed	
employers.	Occupation					
Include part time, season self-employed work.	nal, or Employer's name					
	Employer's address					
Occupation may include or homemaker, if it applie		Number Street			Number Street	
		-01		7: 0 1		7: 0
		City	State	Zip Code	City	State Zip Code
	How long employed there?					
Part 2: Give Details /	About Monthly Income					
Estimate monthly incom spouse unless you are sep	ne as of the date you file this for parated.	<b>m.</b> If you have no	thing to report	for any line, w	rite \$0 in the space. In	clude your non-filing
If you or your non-filing spo more space, attach a sepa	ouse have more than one employer arate sheet to this form.	r, combine the inf	ormation for all	employers for	·	es below. If you need
			For Del	otor 1	For Debtor 2 or non-filing spouse	
	ages, salary, and commissions (before the distribution of the dist			\$0.00		_
3. Estimate and list mor	nthly overtime pay.	3	·	+ \$0.00		<u> </u>
4. Calculate gross inco	me. Add line 2 + line 3.	4		\$0.00		

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Debtor 1Regina			ACTION AND ADDRESS OF THE ACTION AND ADDRESS			(if	
rirst name	Middle Name Last Na	ame	For Debtor 1	For Debtor 2 or non-filing spouse			
Copy line 4 here		4.	\$0.00				
5. List all payroll deductions:							
5a. Tax, Medicare, and Social Sec	urity deductions	5a.	\$0.00				
5b. Mandatory contributions for re	tirement plans	5b.	\$0.00				
5c. Voluntary contributions for ret	irement plans	5c.	\$0.00				
5d. Required repayments of retire	ment fund loans	5d.	\$0.00				
5e. <b>Insurance</b>		5e.	\$0.00				
5f. Domestic support obligations		5f.	\$0.00				
5g. <b>Union dues</b>		5g.	\$0.00				
5h. Other deductions. Specify:		5h. +	\$0.00 +				
6. Add the payroll deductions. Add lin +5h.	es 5a + 5b + 5c + 5d + 5e +5f + 5g	6.	\$0.00				
7. Calculate total monthly take-home	e pay. Subtract line 6 from line 4.	7.	\$0.00				
8. List all other income regularly rec	eived:						
8a. Net income from rental proper business, profession, or farm							
Attach a statement for each property gross receipts, ordinary and necethe total monthly net income.		8a.	\$0.00				
8b. Interest and dividends		8b.	\$0.00				
8c. Family support payments that dependent regularly receive	you, a non-filing spouse, or a						
Include alimony, spousal suppor divorce settlement, and property		8c.	\$0.00				
8d. Unemployment compensation		8d.	\$0.00				
8e. Social Security		8e.	\$2,141.40				
8f. Other government assistance in Include cash assistance that you receive, under the Supplemental Nutrition housing subsidies Specify:	ralue (if known) of any non- such as food stamps (benefits	8f.	\$0.00				
8g. Pension or retirement income		8g.	\$0.00				
8h. Other monthly income. Specify	<u>:</u>	8h. +	\$0.00 +				
9. Add all other income Add lines 8a +	8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$2,141.40				
10. <b>Calculate monthly income.</b> Add lin Add the entries in line 10 for Debtor		10.	\$2,141.40 +		= \$2,141.40		
<ol> <li>State all other regular contribution</li> <li>Include contributions from an unmarent friends or relatives.</li> <li>Do not include any amounts already</li> </ol>	ried partner, members of your house	ehold, your d	dependents, your roomm				
Specify:					11. + \$0.00		
12. Add the amount in the last colum Write that amount on the Summary of					12. \$2,141.40 Combined		
13. Do you expect an increase or dec	rease within the year after you fil	e this form	?		monthly income		

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		Docu	ment Page 54 of 92		
Fill in this inform	mation to identify	your case:			
Debtor 1	Regina First Name	J Middle Name	Agnew Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng
United States B	ankruptcy Court fo	or the: Northern [	District of Illinois (State)		nowing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYYY	<u></u>
	Form 100 e <b>J: Your</b> l	6J Expenses			12/15
information. If r (if known). Ansv					
1. Is this a joir					
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live	in a separate household?			
_ г	No				
Ē	Yes. Debtor 2 r	nust file Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debt	or 2.	
2. Do you have	e dependents?	No			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does dependent live with you?
			Office	-	✓ Yes.
expenses of than yourself and	-	✓ No  Yes			
dependents	6?				
Part 2: Estir	nate Your Ong	oing Monthly Expenses			
_	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup		•	•
	•	non-cash government assistance i uded it on <i>Schedule I: Your Incom</i> e	-		Your expenses
	or home owners or the ground or lo	<b>hip expenses for your residence.</b> In t. 4.	clude first mortgage payments and		<b>\$1,500.00</b>
If not inclu	uded in line 4:				

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Regina J Agnew Case number (if known)
First Name Middle Name Last Name

First Name wildlie Name Last Name		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$175.00
6b. Water, sewer, garbage collection	6b.	\$59.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$0.00
6d. Other. Specify:	6d	\$200.00
7. Food and housekeeping supplies	7.	\$110.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$30.00
10. Personal care products and services	10.	\$25.00
11. Medical and dental expenses	11.	\$40.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments</li> </ol>	12.	\$0.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	<b>1</b> 5a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d	\$0.00
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19. Other payments you make to support others who do not live with you.  Specify:	40	
	19.	\$0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	<del></del>
	200	\$0.00

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Debtor 1 Regina J Agnew Case number (if)		
First Name Middle Name Last Name		
21. <b>Other.</b> Specify:	21	\$0.00
22. Calculate your monthly expenses.		\$2,139.00
22a. Add lines 4 through 21.		\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$2,139.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22.	
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,141.40
23b. Copy your monthly expenses from line 22 above.	23b	\$2,139.00
23c. Subtract your monthly expenses from your monthly income.		\$2.40
The result is your monthly net income.	23c	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:		

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Fill in this infor	mation to identify your o	ase:		
Debtor 1	Regina	J	Agnew	
Debtor 2	First Name	Middle Name	Last Name	Check if this is:
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement showing post-petition expenses as of the following date:
Case number (If known)				MM / DD / YYYY

### Official Form 106J-2

### Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe Your Household
1.Do you	and Debtor 1 maintain separate households?
□ N	o. Do not complete this form.
☐ Y	es.

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Fill in this information to identify your case:						
Debtor 1	Regina	J	Agnew			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number						

### Official Form 106Dec

## Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.  $\frac{1}{2} \left( \frac{1}{2} \right) = \frac{1}{2} \left( \frac{1}{2} \right) \left( \frac{1}{2} \right)$ 

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and						
	that they are true and correct.							
×	/s/ Regina Agnew	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 12/6/2016	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in this in	formation to identify your o	case:					
Debtor 1	Regina First Name	J Middle Na	Agnew me Last Nam	е	-		
Debtor 2 (Spouse, if filing	First Name	Middle Na	me Last Nam	е	-		
United State	s Bankruptcy Court for the:	Northern	District of Illino		_		
Case number	er		(Stat	e)	_		
(If known)							Check if this is ar
Officia	l Form 107						amended filing
Statem	ent of Financia	al Affairs fo	r Individuals	Filing fo	r Bankru	ptcy	12/1
information	olete and accurate as po n. If more space is neede known). Answer every q	ed, attach a separa					
Part 1: Gi	ive Details About Your	Marital Status a	nd Where You Lived	Before			
1. What	is your current marital st	atus?					
	Married						
<u> </u>	Not married						
2. Durin	g the last 3 years, have yo	ou lived anywhere o	ther than where you liv	ve now?			
<b>✓</b> N	No.						
	es. List all of the places yo	ou lived in the last 3	years. Do not include v	vhere you live	now.		
Г	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same a	as Debtor 1		Same as Debtor 1
<u> </u>	Number Street		From	Number St	reet		From
_			То				То
-	Otata	Zin Onda		Cit.	Chaha	Zin Onda	
	City State	Zip Code		City Same a	State as Debtor 1	Zip Code	Same as Debtor 1
				ш			ш
Ī	Number Street	•	From	Number St	reet		From
_			То				To
<u> </u>	Dity State	Zip Code		City	State	Zip Code	
_		was live with a sec	on an lamal a sufficient	in a an		a au tauu!t0 (C	lammunitu arartt-t
	<b>the last 8 years, did you e</b> <i>ritories</i> include Arizona, Calif						
✓ No	)						
Ye	s. Make sure you fill out S	chedule H: Your Co	odebtors (Official Form	106H).			

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Deb	tor 1	Regina J First Name Middle		Agnew ast Name	Case nu	umber (if known)	_
Part	2:	Explain the Sources of Your Inc	come				
	Fill i	you have any income from employm n the total amount of income you receiv vities. If you are filing a joint case and you No Yes. Fill in the details.	ved from all jobs and al	ll busine	sses, including part-time		irs?
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.		Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until le date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business			Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015 ) YYYY	Wages, commissions, bonuses, tips Operating a business			Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014 ) YYYY	Wages, commissions, bonuses, tips Operating a business			Wages, commissions, bonuses, tips Operating a business	
1	Inclu publ filing	you receive any other income during ide income regardless of whether that ir ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details.	ncome is taxable. Exam come; interest; dividend you received together,	ples of ods; mon- list it on	other income are alimony; of ey collected from lawsuits; ly once under Debtor 1.	royalties; and gambling and lot	
			Debtor 1			Debtor 2	
			Sources of income Describe below.		Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until he date you filed for bankruptcy:	Estimated SSI disab	oility	\$22,330.00		
		or last calendar year: January 1 to December 31, 2015 )  YYYYY	Estimated SSI disab	pility	\$24,360.00		
		or the calendar year before that: January 1 to December 31, 2014 ) YYYYY	Estimated SSI disab	oility	\$24,360.00		

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Agnew Debtor 1 Regina \_\_ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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btor 1 Regina		J	Agn	new	Case number	(if known)
First Name		Middle Name	Last	Name		
Insiders include corporations of agent, includir such as child s	de your relatives; a of which you are a	any general partner an officer, director, ness you operate a	s; relatives of any g person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; g securities; and any managing domestic support obligations,
<b>✓</b> No						
Yes. List	all payments to	an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's N	Name					
Number S	Street					
City	State	Zip Code				
Insider's N	Name					
Number S	Street					
City	State	Zip Code				
Within 1 year insider?	before you filed	for bankruptcy,	did you make any	payments or trans	fer any property o	n account of a debt that benefited an
Include payme	ents on debts gua	aranteed or cosigne	ed by an insider.			
<b>✓</b> No						
Yes. List	all payments tha	t benefited an ins	sider.			
			Dates of	Total amount	Amount you still owe	Reason for this payment
			payment	paid	Still Owe	Include creditor's name
Insider's N	Name				-	
Number S	`troot					
	bireei					
City	State					
Insider's N		Zip Code				
	Name	Zip Code				
Number 9		Zip Code				
Number S		Zip Code				
Number S		Zip Code				

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Debtor 1 Regina Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1	Regina First Name	J Middle Name	Agnew Last Name	Case number (if known)		
11.		thin 90 days before you f counts or refuse to make			ank or financial institution,	set off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code	Ü			
12.			ed for bankruptcy, was a		oossession of an assignee fo	r the benefit of o	creditors, a court-
		No Yes	,				
Part	5:	List Certain Gifts and	d Contributions				
13.	Wi		filed for bankruptcy, did	you give any gifts with a to	tal value of more than \$600	per person?	
	<b>∠</b>	No Yes. Fill in the details fo	or each gift.				
		Gifts with a total value per person	of more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Ga	ave the Gift				
		Number Street					
		City State Person's relationship to y	·				
		Person to Whom You Ga	ave the Gift				
		Number Street					
		City State Person's relationship to y	·				

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Debtor 1	Regina	J	Agnew	Case number (if know	(n)	
	First Name	Middle Name	Last Name	<u> </u>		
4. Wi	thin 2 years before you	filed for bankruptcy, di	d you give any gifts or contribut	ions with a total value of	of more than \$600	to any charity?
<b>✓</b>	No					
Ė	ı	for each gift or contribu	tion			
	1 es. I III III li le delalis	ioi each girt or continou	uoi.			
	Gifts or contribution		Describe what you contrib	outed	Date you	Value
	that total more than	\$600			contributed	
	Charity's Name		_			
			_			
	Number Street		_			
	City Sta	ate Zip Code	_			
					1	
rt 6:	List Certain Losses	6				
. Wi	thin 1 year before you f	filed for bankruptcy or s	ince you filed for bankruptcy, di	d you lose anything bed	ause of theft, fire,	other disaster, or
ga	mbling?					
~	No					
F	Yes. Fill in the details.					
	res. Fili III trie details.					
	Describe the propert		Describe any insurance c		Date of your	Value of property
	how the loss occurre	ed	Include the amount that ins		loss	lost
			pending insurance claims of A/B: Property.	n line 33 of <i>Scheaule</i>		
			7VB. Troperty.			
7.	List Certain Payme	nto or Transfora				
	No					
<b>✓</b>	Yes. Fill in the details.					
	•		Description and value of a	ny property	Date payment	Amount of
			transferred		or transfer	payment
					was made	
	Semrad Law Firm		Attorney's Fee - 0.00		12/6/2016	\$0.00
	Person Who Was Paid		_			
	10 N. Martingale Road		_			
	Number Street					
	Suite 400					
	Schaumburg Illir	nois 60173	_			
	City Sta		_			
	3, Oil	p 0000				
	Email or website addre	ess	_			
	None		_			
	Person Who Made the	Payment, if Not You				
					1	
	Person Who Was Paid		_			
			_			
	Number Street		_			
	Number Street		_			
	Number Street		_			
	Number Street  City Sta	ate Zip Code	_ _ _			
	City Sta	·	- - -			
		·	- - -			
	City Sta	ess	- - -			

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Deb	or 1	Regina	J	Agnew	Case number (if know	vn)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed fo p you deal with your creditor not include any payment or tra No Yes. Fill in the details.	rs or to make payme	ents to your creditors?	your behalf pay or transfe	er any property to an	nyone who promised to
	Ш						
				Description and value of transferred	f any property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
18.	the Incl	hin 2 years before you filed f ordinary course of your busi ude both outright transfers and transfers that you have already	ness or financial aff d transfers made as se	airs? ecurity (such as the granting			
	넴	No Yes. Fill in the details.					
	_			Description and value of property transferred		ny property or received or debts pa ge	Date transfer was made
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.	ben	hin 10 years before you filed neficiary? ese are often called asset-prote No Yes. Fill in the details.		you transfer any property	o a self-settled trust or si	milar device of whic	h you are a
	_			Description and value	of the property transferre	d	Date transfer was made
		Name of trust					

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Debtor 1 Regina Agnew Case number (if known) List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code City State Zip Code

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Debtor 1 Regina \_ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt		Regina		J	Agnew	Case nu	umber <i>(if k</i>	nown)		
		First Name		Middle Name	Last Name					
26.		e you been a part	y in any judi	cial or adminis	trative proceeding unde	r any environmental	law? Inc	lude settlen	nents and orde	ers.
	Ħ	Yes. Fill in the det	tails.							
	ш				Court or agency		Nature of	the case		Status of the
					count of agoney		riataro o	0400		case
		Case title								Don din a
		-		_	Court Name					Pending
					N					On appeal
		Case number			NumberStreet					Concluded
					City State	Zip Code				Concluded
		•								
Part	11:	Give Details Al	bout Your I	Business or C	Connections to Any Bu	usiness				
27.	With	A sole propri	ietor or self-e	employed in a t	rade, profession, or othe	er activity, either full-t			o any business'	?
		A member of A partner in a			(LLC) or limited liability p	artnership (LLP)				
			-		tive of a corporation					
		_			equity securities of a cor	rporation				
		_				p o. caso				
	<b>✓</b>	No. None of the a								
		Yes. Check all the	at apply abo	ove and fill in the	e details below for each	business.				
					Describe the nat	ure of the business			dentification n	
								include Soc	cial Security n	umber or IIIN.
		Business Name						EIN:		
		Number Street			No			Dates busin	ness existed	
		City	Ctoto	Zin Codo	Mame of account	tant or bookkeeper		_	_	
		City	State	Zip Code				From	To	
					Describe the nat	ure of the business			dentification n	
		Business Name						EIN:		
		Daoineos Name								
		Number Street						Dates busin	ness existed	
					Name of account	tant or bookkeeper				
		City	State	Zip Code				From	To	
					Describe the nat	ure of the business		Employer Id	dentification n	umber Do not
					Docombo the hat	are or the backness			cial Security n	
								EIN:		
		Business Name								
		Number Street						Dates busin	ness existed	
					Name of account	tant or bookkeeper				
		City	State	Zip Code				From	To	

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Debt	tor 1	Regina		J	Agnew	Case number (if known)
		First Name		Middle Name	Last Name	
28.		hin 2 years before ditors, or other par No Yes. Fill in the det	ties.	bankruptcy, did yo	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
		Number Street			<del>-</del>	
		Number Street				
		City	State	Zip Code	-	
		•		·		
Part	12:	Sign Below				
t	rue a	and correct. I unde kruptcy case can	rstand that	making a false stat	ement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		<b>x</b> /s/	Regina Agnev	I		×
		Signatu	re of Debtor	1		Signature of Debtor 2
		Date 1	2/6/2016			Date
	Did yo	ou attach addition	al pages to \	our Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
[	<b>→</b> N	lo				
Ì	Y	'es				
	Did yo	ou pay or agree to	pay someon	e who is not an att	orney to help you fill out b	pankruptcy forms?
Į.	<b>✓</b> N	lo				
Ì	<b>=</b> '	es. Name of person	ı			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:								
Debtor 1	Regina	J	Agnew					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		Northern	District of Illinois (State)					
Case number (If known)								

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. name: PRA RECEIVABLES MANAGEMENT, LLC, c/o Adeanne Hooks Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Unsecured Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Regina	J	Agnew	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired Perso	onal Property Leas	es	
informa		ate leases. Unexpired	l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
De	scribe your unexpired personal	property leases		Will the lease be assumed?
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			No Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Part 3:	Sign Below			
	er penalty of perjury, I declare t perty that is subject to an unexp		my intention about any	property of my estate that secures a debt and any personal
_	/s/ Regina Agnew		*_	
S	Signature of Debtor 1		Siç	gnature of Debtor 1
D	Date 12/6/2016 MM/DD/YYYY		Da	ate MM/DD/YYYY

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B 203 (12/94)

In

### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

re <b>Regina J Agnew</b>	C	Case No.	
Debtor	<del></del>		(If known)
	C	Chapter	Chapter 7
DISCLOSURE OF COMI  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr compensation paid to me within one year beforendered or to be rendered on behalf of the delta to the compensation of t	. P. 2016(b), I certify that I am the attore the filing of the petition in bankrupt	ney for the above cy, or agreed to be	named debtor(s) and that e paid to me, for services
For legal services, I have agreed to accept			\$465.00
Prior to the filing of this statement I have receive	ved		\$0.00
Balance Due			\$465.00
2. The source of the compensation paid to me wa	as:		
<b>✓</b> Debtor	Other (specify)		
3. The source of the compensation paid to me is:			
<b>✓</b> Debtor	Other (specify)		
4. I have not agreed to share the above-disclementary and associates of my law firm.	osed compensation with any other per	son unless they a	re
I have agreed to share the above-disclosed members or associates of my law firm. A country the people sharing in the compensation, is	opy of the agreement, together with a		
<ol> <li>In return for the above-disclosed fee, I have ag a. Analysis of the debtor's financial situat bankruptcy;</li> </ol>			
b. Preparation and filing of any petition, s	chedules, statements of affairs and pla	an which may be r	equired;
c. Representation of the debtor at the med	eting of creditors and confirmation hea	aring, and any adj	ourned hearings thereof;
6. By agreement with the debtor(s), the above-dis	closed fee does not include the follow	ring services:	
	OFFICIATION		
	CERTIFICATION		
I certify that the foregoing is a complete stateme debtor(s) in this bankruptcy proceedings.	nt of any agreement or arrangement fo	or payment to me t	for representation of the
12/6/2016	/s/ Yisroel Y	Moskovits	
Date	Signature o	f Attorney	
	Semrad L		
	Name of	aw firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Agnew, Regina J  Debtor(s)	Case No	
		Chapter.	Chapter7
	VERIFIC	CATION OF CREDITOR MAT	TRIX
TI knowledge		y that the attached list of creditors is tr	rue and correct to the best of their
Date:	12/6/2016	/s/ Agnew, Regin Agnew, Regina Signature of Del	J

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN 56303

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS , SD 57107

CAPITAL ONE 11013 W BROAD ST GLEN ALLEN , VA 23060

HARRIS 111 WEST JACKSON B SUITE 400 CHICAGO , IL 60604

AMERCRED 801 Cherry St Ste 3500 Fort Worth, TX 76102

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , IL 60622

WEBBNK/FHUT Po Box 166 Newark , NJ 07101

A/R CONCEPTS 18-3 E DUNDEE RD STE 330 BARRINGTON , IL 60010

Advanced Inpatient Consultants 3461 Momentum Pl Chicago , IL 60689

Advocate Medical Group PO Box 92523 Chicago , IL 60675

Americash - Bankruptcy PO Box 184 Des Plaines , IL 60016

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Arlington Ridge Pathology 800 Central Rd Arlington Heights , IL 60005

Asthma and Allergy Associates 9301 W Gold Rd #301 Suite 300 Des Plaines , IL 60016

Best Practices Inpatient Care 3880 Salem Lake Dr Lake Zurich , IL 60047

Check Into Cash Corporate 201 Keith Street Ste 80 Cleveland, TN 37311

City of Des Plaines 1420 Miner St Des Plaines , IL 60016

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

CREDIT ONE BANK 585 S. PILOT STREET LAS VEGAS, NV 89119

Des Plaines Radiologists 6910 S Madison St Willowbrook , IL 60527

EOS CCA 700 Longwater Drive Norwell , MA 02061

Home Patient Services 8240 N McCormick Blvd. Skokie , IL 60076 HSBC BANK PO Box 5253 Carol Stream , IL 60197

Illinois Bone and Joint 900 Rand Rd #200 Des Plaines , IL 60016

ILLINOIS COLLECTION SE 8231 185TH ST STE 100 TINLEY PARK, IL 60487

PRA RECEIVABLES MANAGEMENT, LLC, c/o Adeanne Hooks POB 41067 Norfolk , VA 23541

IRS 1 PO Box 7346 Philadelphia , PA 19101

Midwest Pulmonary and Sleep Consultants 5600 W Addison St Chicago , IL 60634

MIRAMEDRG 111 WEST JACKSON CHICAGO , IL 60604

Nicor - PO Box 5407 PO Box 5407 Carol Stream , IL 60197

Northshore University Healthsystem 1301 Central St # 218 Evanston , IL 60201

Northwest Community Healthcare 28079 Network Pl Chicago , IL 60673

Northwest Radiology 800 Central Rd Arlington Heights , IL 60005

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The Pediatric Faculty Foundation Inc. PO BOX 4051 Carol Stream , IL 60197

Pinnacle Management Services 830 Roundabout, Suite B Dundee , IL 60118

PLAINS COMMERCE BANK 1411 E 10th St Sioux Falls , SD 57103

Quest Diagnostics PO Box 7306 Hollister, MO 65673

Resurrection Medical Center 5645 W Addison Chicago , IL 60634

Resurrection Immediate Care 4900 N Cumberland Ave Harwood Heights , IL 60706

Resurrection Health Care 3 Erie Court Oak Park , IL 60302

River Trails School District 26 1900 E Kensington Rd Mount Prospect , IL 60056

Silverscript PO BOX 504849 Saint Louis , MO 63150

Social Security Admin 77 West Jackson Blvd 3rd Floor Chicago , IL 60604

Social Secuirty 1500 Woodlawn Drive Office of Central Operations Baltimore , MD 21241 Sprint P O Box 629023 El Dorado Hills , CA 95762

TCF Bank 601 W 14th Street Chicago Heights , IL 60411

TRIBUTE POB 105555 ATLANTA , GA 30348

UroPartners, LLC 3183 Paysphere Circle Billing Department Chicago , IL 60674

Village of Mount Prospect 50 S Emerson St Mount Prospect, IL 60056

Walmart 1 PO Box 981400 El Paso , TX 79998

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago , IL 60602

Presence Holy Family Medical Center 100 N River Rd Des Plaines , IL 60016

KMP Health Providers LLC 1400 E Golf Rd # 118 Des Plaines , IL 60016

Dr. Mohammad Abtahi M.D. 1400 E Golf Rd #126 Des Plaines , IL 60016

Family Medicine Specialist 930 Mt Prospect Plaza Mount Prospect, IL 60056

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Cook County Department of Revenue 118 N Clark St, Room 1160 Chicago , IL 60602

Suburban Lung Associates SC Po Box 2776 Carol Stream , IL 60132

Merchants Credit Guide Co. 223 W Jackson Blvd Ste 900 Chicago , IL 60606

CEP America LLC Po Box 582663 Modesto , CA 95358

Ann & Robert Lurie Children's Hospital PO Box 4066 Carol Stream , IL 60197

Midwest Imaging Professionals PO Box 3223831 Pittsburgh , PA 15250

Sinai Medical Group 26460 Network Place Chicago , IL 60673

All Kids and Familycare PO Box 19121 Springfield , IL 62794

Lincare Po Box 17306 Clearwater , FL 33762

Walgreens 1419 Lake Cook Road Deerfield , IL 60015

RushMore Service Center P.O. Box 5508 Sioux Falls , SD 57117 Allied Interstate Po Box 361445 Columbus , OH 43236

Village of Wauconda Photo Enforcement 75 Remittance Dr. Suite 6658 Chicago , IL 60675

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 465.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and at tendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Initials RA

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: Dec 6, 2016

Client

orne

Markovits

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Debtor 1 Regina	J	Agnew	Case number (if know)	n)
First Name	Middle Name	Last Name		
Part 6: Answer These Qu	estions for Reporting Purpos	es		1. C 1 - 11 I C C & 101(9) as
16. What kind of debts do you have?	"incurred by an individue No. Go to line 16b.  Yes. Go to line 17.	ual primarily for a pe ily business debts? or investment or thro	rsonal, family, or nousel Business debts are deb ugh the operation of the	ets that you incurred to obtain e business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	ter 7 Do vou estimate		
18. How many creditors do you estimate that you owe?	☐ 1-49 ☑ 50-99 ☐ 100-199 ☐ 200-999		10,000 -25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00 \$100,0	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			the of a series at the of the	the information provided is true and
For you	orrect.  If I have chosen to file under of title 11, United States Coounder Chapter 7.  If no attorney represents me a out this document, I have obtounderstand making a false sconnection with a bankrupton both. 18 U.S.C. §§ 152, 134	Chapter 7, I am awa de. I understand the and I did not pay or tained and read the with the chapter of statement, concealing case can result in 1, 1519, and 3571.	re that I may proceed, if relief available under each agree to pay someone whotice required by 11 U. title 11, United States Concepts, or obtaining	money or property by fraud in imprisonment for up to 20 years, or Debtor 2
		16 DD / YYYY	Executed o	MM / DD / YYYY

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Fill in this infor	mation to identify your cas	se:		
Debtor 1	Regina	J	Agnew	<b>.</b>
Dahaar 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	` <b> </b>
United States I	Bankruptcy Court for the:	Northem	District of Illinois	
Case number		$\overline{}$	(State)	
(If known)		/		Check if this is an
Official	Form 106Dec	5		amended filing
		_	tor's Schedules	12/15
money or prop U.S.C. §§ 152, Part 1: Sigr	erty by fraud in connectio 1341, 1519, and 3571. n Below	n with a bankruptcy cas	se can result in fines up to \$25 ney to help you fill out bankrup	ng a false statement, concealing property, or obtaining 50,000, or imprisonment for up to 20 years, or both. 18
✓ No	Name of person	ne who is NOT all accom		ion Preparer's Notice, Declaration, and
that they	are true and correct.	that I have read the sun	nmary and schedules filed with	

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Dobtor	1 Regina	J	Agnew	Case number (if known)
Deptor	First Name	Middle Name	Last Name	
28. W	reditors, or other parties.		Date issued	nent to anyone about your business? Include all financial institutions,
	Name		MM/DD/YYYY	
	Number Street		_	
	City State	e Zip Code	<del>_</del>	
	Sign Below			
		that making a false si in fines up to \$250,000		ments, and I declare under penalty of perjury that the answers are serty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of C	Debtor 1	T	Signature of Debtor 2
			•	Date
	Date 12/6/20			
Did	you attach additional pag	es to Your Statement o	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to pay so	omeone who is not an a	attorney to help you fill ou	t bankruptcy forms?
	No Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Debtor	Regina	J	Agnew	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpir	red Personal Property Lease	s		
: f	tion balavu Da nat li	property lease that you listed in st real estate leases. Unexpired nal property lease if the trustee o	leases are leases mai	Contracts and Unexpired Leases (Official Form 106G) are still in effect; the lease period has not yet ended. \U.S.C. § 365(p)(2).	, fill in the fou may
Des		d personal property leases		Will the lease be assumed? ☐ No	
Les	sor's name:			Yes	occording to the second
	cription of leased perty:				
Les	sor's name:			No Yes	TO COLUMN TO THE PROPERTY OF T
	cription of leased perty:				
Les	sor's name:			No Yes	ACOURAGE AND CONTRACTOR OF THE STATE OF THE
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	o constituente de la constituent
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	Me(I) Albhur complete garante ann ann ann ann ann ann ann ann ann an
	cription of leased perty:				***************************************
Part 3:	Sign Below				
Unde prope	r penalty of perjury, erty that is subject to	I declare that I have indicated mo o an unexpired lease.	y intention about any	property of my estate that secures a debt and any pers	ional
×	Regina Agnew	Hings-	<b>★</b> Sigi	nature of Debtor 1	
Da	nte 12/6/2016 MM/DD/YYYY	_	Dat	e MM/DD/YYYY	

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Agnew, Regina J	Case No	
	Debtor(s)	<del>- 1</del>	
		Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
Ti knowledge		rify that the attached list of creditors is tru	ue and correct to the best of their
Date:	12/6/2016	/s/ Agnew, Regin Agnew, Regina J Signature of Deb	a Hine Object

